UNITED STATES SUBMIT IN TO LIGATE Budget Burger N

SIGNED	Ran tubing get below parted at Spotted 25	this depth 3513' - cou s sks plug (s sks plug (s sks plug (sks plug (to sks plug (g collapse Picked uld not so 3513'. 400'. surface	ed at 3513'. up on casing rew back too	Could g and in gether.	l not found	March	18,190
18. I hereby cert	Ran tubing get below parted at Spotted 25 " 25 " 10	this depth 3513' - cou s sks plug @ sks plug @ sks plug @	g collapse Picked uld not so 3513'. 400'. surface	ed at 3513'. up on casing	Could g and in gether.	l not found		
	Ran tubing get below parted at Spotted 25 " 25 " 10	this depth 3513' - cou s sks plug @ sks plug @ sks plug @	g collapse. Picked uld not so 3513'.	ed at 3513'. up on casing crew back tog	Could and 1	not ound		
2-65:	Ran tubing get below parted at Spotted 25	this depth 3513' - cou sks plug @ 5 sks plug @	g collapse. Picked uld not so 3513'.	ed at 3513'. up on casing crew back tog	Could and 1	not ound		
2-65:	Ran tubing get below parted at Spotted 25	this depth 3513' - cou sks plug @ 5 sks plug @	g collapse. Picked uld not so 3513'.	ed at 3513'. up on casing crew back tog	Could and 1	not ound		
? - 65 :	Ran tubing get below parted at Spotted 25	this depth 3513' - cou sks plug @ 5 sks plug @	g collapse. Picked uld not so 3513'.	ed at 3513'. up on casing crew back tog	Could and f	not ound		
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nent to th	ils work.) *			e ili onn d ervensmu kun v	vertical dep	tas for all	markers an	d zones pe
17. DESCRIBE PRO	OPOSED OR COMPLETED C	OPERATIONS (Clearly at	ate all pertinent de	Completion or F Stalls, and give pertinent a and measured and true	dates, inclu	ding estim	u Log form.) ated date of	etarting a
(Other)		CHANGE PLANS		(Other) (Note: Report Completion or F	results of m	uitiple con	npiction on	Well
BHOOT OR A		ABANDON®		SHOOTING OR ACIDIZII	40	ABA	ANDONMENT*	X
FRACTURE 1	TREAT	MULTIPLE COMPLETE	,	FRACTURE TREATMENT	.		TERING CASIN	<u> </u>
TEST WATE	ER SHUT-OFF	PULL OR ALTER CASI	ING	WATER SHUT-OFF			Pairing wat:	
	NOTICE OF INT		1		SUBSEQUENT		•	
16.	Check /	Appropriate Box 7	o Indicate Nat	ure of Notice, Report	ar Other	Data		-
			3314' DF	•	-2.	Lea	1	Mex:
14. PERMIT NO.			Show whether Dr. RT	. OR, etc.)	12.	COUNTY O	, 265,	33E
I'e:	80' FSL & 19 a County, No	ew Meyico	ec 15, T-	205, R-33E,				
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4. LOCATION OF	O. Box 249	on clearly and in accor	Texas	te regularmente d	-		3	
3. ADDRESS OF	FORERATOR				9.	WBILL NO.	co Fed	erar
Co	astal State	s Gas Produ	icina Comp	anv	. 8		EARE NAME	awa 1
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	a ase this form for pro-	oposals to drill or to	deepen or plug bac	N VVELLS k to a different renervoir osain.)				
	TOTALITY OF THE	JINES MIND I						
	SUNDRY NO	OTICES AND I		A WELLS	n.	IP INDÍAN,		
	SUNDRY NO	GEOLOGICAL				NM	- 0296	I-A

*See Instructions on Reverse Side

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